DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 08/18/2006

Provider Inspection Summary

For the period 07/01/2003 to 06/30/2006 Adult Family Home STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: LSS BONNIE VIEW (0009530)

Address: 6424 BONNIE VIEW RD, PICKETT, WI 54964

License Status: REGULAR

Licensed/Certified/Registered 02/07/2002

Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

Survey History

Survey ID: 0095085 End Date: 06/08/2005 Type: ABBREVIATED Purpose: SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10007166 Served 06/13/2005

Deficiencies Cited Subject Area Compliance

Verified

88.05(3)(d) ANNUAL WELL WATER INSPECTIONS 88.05(4)(a) FIRE SAFETY-FIRE EXTINGUISHERS Verified Corrected